

Is your congregation sending you to YM Certification School? _____
 If yes, please explain their expectations for your involvement in the course.
 (Be specific as possible): _____

How are you planning to pay the tuition? Church ___ Personal ___ Other ___
(It is acceptable to pay tuition over time, if necessary)

What are your expectations for attending the YM Certification School?

WORK EXPERIENCE

Are you currently working with any youth group which is/is not church related?

Yes ___ No ___ Please explain in either case: _____

Please summarize your experience in the area of youth ministry/education.

Include volunteer and staff experience. _____

Please summarize your work, not related to youth ministry (including current employment): _____

ACADEMIC BACKGROUND

High School _____ Years _____ Graduation Y N

Technical School _____ Years _____ Graduation Y N

College _____ Years _____ Graduation Y N

Graduate School _____ Years _____ Graduation Y N

Military Service (Branch) _____ Years ___ Specialty _____

I, the applicant, declare that:

1. I agree to abide by the rules outlined in the Certification School activities as outlined by the instructors.
2. I understand there are inherent risks involved in some activities that are beyond the control of the sponsoring agency or its staff and personally agree to assume all such risks.
3. I further understand, however, that every care and attention will be given to the health, emotionally and physically, of the participants, but that Gettysburg Seminary cannot be held liable for any injuries sustained which were not directly caused by their failure to take due care.
4. I assume the responsibility for carrying full health care insurance coverage. The Seminary will not provide health care insurance for participants. Please include a copy as proof of insurance. *(needed by the start of the course)*

I, hereby authorize the leader of the event to secure medical advice and services as may be deemed necessary and appropriate for the health and safety of myself and I agree to assume full financial responsibility. It shall be at the discretion of the leader of the event as to what steps are taken to insure the welfare and safety of each participant.

I declare that all statements contained herein are true and accurate to the best of my knowledge.

Signed _____ Date _____

***Candidates must be willing to agree, by the beginning of the first weekend of course work, to a satisfactory state-sanctioned child abuse background check, unless they have already received these clearances. In which case, they may simply provide a copy with their application packet.**

In addition to this application, candidates must submit the following to be considered for admission to the YMCS program:

1. FAITH JOURNEY & YOUTH MINISTRY VISION

Please write a brief autobiography of your faith journey. Include how you came to believe in Christ, what faith means to you, and how it has affected your life (*1-2 pages*).

2. YOUTH MINISTRY VISION

Also, on a separate page or two, describe your vision or dream for youth ministry. What interests you about serving in youth ministry and what would you like to accomplish? How does your faith influence your vision and what gifts do you bring?

3. LETTERS OF REFERENCE

Candidates must further provide three letters of reference with this application, one from a member of the congregation, a pastor and a third source, in order to be enrolled and considered for certification.

4. DEPOSIT

**Please include a \$250.00 non-refundable check made payable to:
Lutheran Theological Seminary at Gettysburg**

Please return application and all materials to:

Celle Huth, Director
Youth Ministry Certification School
61 Seminary Ridge
Gettysburg, PA 17325